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APPLICATION DATA SHEET**Application Information**

Application number::

Filing Date:: 12/17/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: WEATHERPROOF SHEETS FOR COPYING,
PRINTING AND WRITING AND METHODS
RELATED THERETO

Attorney Docket Number:: 500035.401

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: Yes

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

100466 66942001

First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Scott
Middle Name::	E
Family Name::	Silver
Name Suffix::	
City of Residence::	Fox Island
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	540 Northshore Blvd.
City of mailing address::	Fox Island
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98333

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Todd
Middle Name:: D
Family Name:: Silver
Name Suffix::
City of Residence:: Tacoma
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 2808 North Cedar Street
City of mailing address:: Tacoma
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98406

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Dennis
Middle Name::
Family Name:: Oscar
Name Suffix::
City of Residence:: West Bend
State or Province of Residence:: WI
Country of Residence:: US
Street of mailing address:: 7900 Salisbury Road
City of mailing address:: West Bend
State or Province of mailing address:: WI
Country of mailing address:: US
Postal or Zip Code of mailing address:: 53090

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	J.L. Darling Corporation
Street of mailing address::	2614 Pacific Highway East
City of mailing address::	Tacoma
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98424-1017